Investors Bancorp Inc Form 4 February 25, 2014

### FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

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January 31,

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Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Form 5 Filed pure obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1(b).

Stock

(Print or Type Responses)

1. Name and Address of Reporting Person * Kalamaras Paul			2. Issuer Name and Ticker or Trading Symbol Investors Bancorp Inc [ISBC]	5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)			
			*				
(Last)	(First)	(Middle)	3. Date of Earliest Transaction				
101 JFK PARKWAY			(Month/Day/Year) 02/23/2014	Director 10% Owner _X_ Officer (give title Other (specify below) Exec VP			
	(Street)		4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check			
SHORT HIL	LLS, NJ 070	78	Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(7in)					

	GIIODE III	. G NI 05050	T Hea(Mon	iii/Buy/Tear)		_X_ Form filed by C	1 0	
SHORT HILLS, NJ 07078						Person		
	(City)	(State)	Zip) Table	I - Non-D	erivative Securities Acq	uired, Disposed of	, or Beneficiall	y Owned
	1.Title of	2. Transaction Date	2A. Deemed	3.	4. Securities Acquired	5. Amount of	6. Ownership	7. Nature of
	Security	(Month/Day/Year)	Execution Date, if	Transactio	n(A) or Disposed of (D)	Securities	Form: Direct	Indirect
	(Instr. 3)		any	Code	(Instr. 3, 4 and 5)	Beneficially	(D) or	Beneficial
			(Month/Day/Year)	(Instr. 8)		Owned	Indirect (I)	Ownership
						- 11 1	/T . 4\	CT 45

(IIIstr. 5)		(Month/Day/Year)	(Instr. 8)	(IIISII. 3,	4 and	3)	Owned Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)
			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(IIISU: 1)	(msu. 1)
Common Stock	02/23/2014		F	4,063	D	\$ 25.54	157,220	D	
Common Stock							3,438	I	By ESOP
Common							15,000	I	By IRA

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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#### Edgar Filing: Investors Bancorp Inc - Form 4

number.

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	le and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration D	ate	Amou	ınt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	rlying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Own
	Security				Acquired						Follo
	·				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						`
					4, and 5)						
									Amount		
						Date	Expiration		or		
						Exercisable	Date	Title	Number		
						Lacroisdoic	Dute		of		
				Code V	(A) (D)				Shares		

#### **Reporting Owners**

Reporting Owner Name / Address				
<b>rg</b>	Director	10% Owner	Officer	Other
Kalamaras Paul				
101 JFK PARKWAY			Exec VP	
SHORT HILLS, NJ 07078				

# **Signatures**

Thomas Splaine, Jr., pursuant to power of attorney 02/25/2014

\*\*Signature of Reporting Person Date

## **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

Reporting Owners 2